U.S. Department of Lebor Office of Lebor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.E. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or ovil presalties as provided by 29 U.S.C 439 or 440.

	For Official Use Only	
Ì	CONTRACTOR OF THE CONTRACTOR	
l e	(NG 16590)	*

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U- 7/CC	2. Fiscal Year Covered From:		
	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name William T Buntley	Name Painters AFL-CIO Floor Coverers Local 1236		
	Labor Organization File Number 041+602		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 1943 SW Cerise Way	Street 11105 NE Sandy Blvd.		
City Troutdale	City Portland		
State Oragon ZIP Code • 4 97069-5432	State Oregon ZiP Code + 4 97220-2555		
5. Position in labor organization, Treasurer			
Enter appropriate data below it, during the past fiscal year, you or your spo (except as specified in the excl	ruse or minor child directly or indirectly had any of the following interests usions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizations.	derived income or other economic benefit of ion represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
Trace Name, if any:			
P.O. Box, Bidg., Room No., if any	Ē.		
	7.b. Amount		
Street			

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjusy and other applicable penalties of the law, that all of the information

ZIP Code + 4

	undersigned's knowledge and belief, true, correct, and complete, (See the se		
) -/	1 1	
	Signed of Sule Dies	on 8/08/05	503-666-3045
٠.,		Date	Telephone Number

City

State:

Name of Person Filing William Huntley		File Number U-			
B. Heid an interest in or derived knome or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
8, Name and address of Business (including trade name, if any).	9. Business deals with:				
Name Floor Covering Apprenticeship Training Fund		_			
Trade Name, if any:	a. Labor Organiza	ation			
F.O. Box, Bldg., Room No., if any	c. Employer				
Sweet 11105 NE Sandy Blvd.					
Cay Portland					
State Oregon ZiP Code + 4 97220-2555					
TO, If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such deal	-			
Name	The business provides training to apprentices and journeymen under a collective bargained agreement,				
Tracks Name, if any:	of which the labor organization is a party to. Under the collective bargained agreement, the employers remit contributions to the business.				
P.O. Box, Bidg., Room No., if any	Chiprojulo Texte of	MILLION DESCRIBER OF THE PROGRAMMENT			
Street	11,b. Approximate dollar val	ue of such dealing. \$73,831			
City	12.s. Nature of interest he	······································			
State ZIP Code + 4	Wages received from apprenticeship con	om the business for services as ordinator.			
	12.b. Amount	\$46,114			
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (Including trade name, if any).	14.a. Nature of payment.				
Name	***************************************				
Trade Name. If any:	***************************************				
P.O. Box, Bidg., Room No., if any	***************************************				
Street	***				
City					
State 212 Code + 4					
13.b. Is the Business an Employer 0x Consultant 7	14.b, Amount of payment.				

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Name of Pers	on Filing Willia	··· ··· · · · - 			File Number	-	ļ
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Part & Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any). Name Floor Covering Apprenticeship Training Fund Trade Name, if any: P.O. Box, Bidg., Room No., if any Street 11105 NE Sandy Blvd. City Fortland State Oregon ZiPCode + 4 97220-2555 10. if 3 b. or 9 c. is checked give trust or empkyer's name. Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street City State ZiP Code + 4 2IP Code + 4 11.a. Nature of such dealing. The business provides training to apprentices and journeymen under a collective bargained agreement, of which the labor organization is a party to. Under the collective bargained agreement, the employers remit contributions to the business. 11.a. Nature of interest held or income received. Per diem to attend conference	<u> </u>			
Trade Name, if any: P.O. Box, Bidg., Room No., if any Street 11105 NE Sandy Blvd. City Portland State ozegon ZiP Code + 4 97220-2555 10. If \$2\$ to 9.0. is checked give trust or employer's name. Name Name Trade Name, if any: P.O. Box, Bidg., Room No., if any Street City State ZIP Code + 4 ZIP Code + 4 11.a. Nature of such dealing. The business provides training to apprentices and journeymen under a collective bargained agreement, of which the labor organization is a party to. Under the collective bargained agreement, the employers remit contributions to the business. 11.b. Approximate dollar value of such dealing. The business provides training to apprentices and journeymen under a collective bargained agreement, of which the labor organization is a party to. Under the collective bargained agreement, the employers remit contributions to the business. 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Per diem to attend conference	8. Name and address of Business (including trade name, if any).	9. Business deals with:		
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Sireet 11105 NE Sandy Blvd. City Portland State Oregon ZIP Code + 4 97220-2555 10. H 9.b. or 9.c. is checked give frust or employer's name. Name Trade Name. Hany. P.O. Box. Bkig. Room No., Hany Street City State ZIP Code + 4 T1.b. Approximate dollar value of such dealing. The businese provides training to apprentices and journeymen under a collective bargained agreement, of which the labor organization is a party to. Under the collective bargained agreement, the employers remit contributions to the business. T1.b. Approximate dollar value of such dealing. 11.a. Nature of such dealing. The businese provides training to apprentices and journeymen under a collective bargained agreement, the employers remit contributions to the business. 11.a. Nature of such dealing. The businese provides training to apprentices and journeymen under a collective bargained agreement, of which the labor organization is a party to. Under the collective bargained agreement, the employers remit contributions to the business. 12.a. Nature of interest held or income received. Per diem to attend conference	Trade Name, if any:			
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12.a. Natura of interest held or income received. Per diem to attend conference	City			
Per diem to attend conference	State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$73,831		
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12.b. Amount. \$300		Per diem to attend conference		
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12.b. Amount. \$300				
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Street 11105 NE Sandy	Blvd.	c. Employer		
CHy Portland				
State Oregon	ZIP Code + 4 97220-2555			
10. If 9.b. or 9.c. is checked give	e trust or employer's name.	11.a. Nature of such dealing.		
Name		The business provides training to apprent journeymen under a collective bargained a		
Trade Name, if any:		of which the labor organization is a party to. Under the collective bargained agreement, the employers remit contributions to the business.		
P.O. Box, Bidg., Room No., if	япу	definitions reserve conservations to the man	WDG0.	
Street				
City				
State	ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$73,831	
		12.a. Nature of interest held or income received. Reimbusement for business use of cell pho	ne	
		1		
		12.b. Amount.	\$480	